

# Disclosure Report Cover

Amendment

☐ Yes☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information

## 1. Committee Information

a. Full Name

Committee to Elect Mike Woodard

c. ID Number

20-2892994

b. Mailing Address (include City, State and Zip Code)

PO Box 1032  
Durham, NC 27702

d. Date Filed

01/12/10

c. Phone Number

919.599.5143

2. Report Year

2009

3. Period Start Date (mm/dd/yy)

10/20/09

4. Period End Date  
(mm/dd/yy)

12/31/09

5. Treasurer Full Name

Michael S. Wilson

6. Type of Committee (Check One)

- ☒ Candidate Campaign  
☐ PAC  
☐ Independent  
Expenditure  
☐ Legal Expense Fund
- ☐ Party  
☐ Referendum  
☐ Joint Fundraiser

7. Type of Fund (if applicable, check one)

- ☐ "Booster Fund"  
☐ Building Fund

☐ Other

9. Type of Report

(check only one type of report from one category)

Municipal

- ☐ Organizational  
☐ Thirty-five day

☐ Pre-primary☐ Pre-election☐ Pre-runoff☐ Semi-annual☐ Mid Year☒ Year End☐ Final☐ Special

State/County

- ☐ Organizational  
☐ Quarterly

☐ First☐ Second☐ Third☐ Fourth☐ Semi-annual☐ Mid Year☐ Year End☐ Final☐ Special

Referendum

- ☐ Organizational  
☐ Pre-referendum

☐ Final☐ Supplemental Final☐ Annual☐ Special

8. Number of Fundraisers this Report

0

## 11. Account Information

a. Financial Institution Full Name

Sun Trust Bank

b. Purpose

Campaign  
Account

c. Account Code

d. Period Begin Balance

\$ 1005.14

## 11. Account Information

a. Financial Institution Full Name

b. Purpose

c. Account Code

d. Period Begin Balance

\$

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Printed Name of Signer

Signature of Appointed Treasurer

Date

## FOR OFFICE USE ONLY

Date Received:

1/12/10

Employee:

m. Oble

Date Postmarked:

Date Scanned:

Date Data Entered:

Employee:

Employee:

Employee:

Delivery Method

- ☐ Normal Mail  
☐ Registered Mail  
☒ Hand Delivered  
☐ Electronically Filed  
☐ Signer has not received mandatory training

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

# Detailed Summary

Amendment

☐ Yes ☒ No

Use this form to summarize all disclosure reporting forms and to total monetary information.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>		<b>3. ID Number</b>	
Committee to Elect Mike Woodard		Pre-Election		20-2892994	
<b>Start of Election Cycle:</b>		<b>January 1,</b>		<b>2009</b>	
		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
<b>4) Cash on Hand at Start</b>		\$ 1005.14		\$ 155.14	
<b>RECEIPTS</b>					
<b>5) Aggregated Contributions from Individuals</b>		(CRO-1205)		\$ 150.00	
<b>6) Contributions from Individuals</b>		(CRO-1210)		\$ 650.00	
<b>7) Contributions from Political Party Committees</b>		(CRO-1220)		\$	
<b>8) Contributions from Other Political Committees</b>		(CRO-1230)		\$ 0.00	
<b>9) Loan Proceeds</b>		(CRO-1410)		\$	
<b>10) Refunds/Reimbursements To the Committee</b>		(CRO-1240)		\$	
<b>11) Other Receipt Sources</b>					
<b>11a) Interest on Bank Accounts</b>		(CRO-1250)		\$	
<b>11b) Contributions from Not-for-Profit Organizations</b>		(CRO-1250)		\$	
<b>11c) Outside Sources of Income</b>		(CRO-1250)		\$	
<b>11d) Legal Expense Fund – Other Sources</b>		(CRO-1270)		\$	
<b>11 e) Exempt Purchase Price Sales</b>		(CRO-1265)		\$	
<b>12) TOTAL RECEIPTS</b> (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)				\$ 800.00	
<b>EXPENDITURES</b>					
<b>13) Disbursements</b>					
<b>13a) Operating Expenditures</b>		(CRO-1310)		\$	
<b>13b) Contributions to Candidates/Political Committees</b>		(CRO-1310)		\$ 0.00	
<b>13c) Coordinated Party Expenditures</b>		(CRO-1310)		\$	
<b>14) Aggregated Non-Media Expenditures</b>		(CRO-1315)		\$	
<b>15) Loan Repayments</b>		(CRO-1420)		\$	
<b>16) Refunds/Reimbursements From the Committee</b>		(CRO-1320)		\$	
<b>17) In-Kind Contributions</b>		(CRO-1510)		\$	
<b>18) TOTAL EXPENDITURES</b> (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)				\$ 0.00	
<b>19) Cash on Hand at End</b> (Add lines 4 and 12 together, then subtract line 18)				\$ 800.00	
<b>ADDITIONAL INFORMATION</b>					
<b>20) Non-Monetary Gifts Given to Other Committees</b>		(CRO-1330)		\$	
<b>21) Outstanding Loans (incl. ones from other campaigns)</b>		(CRO-1430)		\$	
<b>22) Debts and Obligations owed By the Committee</b>		(CRO-1610)		\$	
<b>23) Debts and Obligations owed To the Committee</b>		(CRO-1610)		\$	
<b>24) Account Transfers Within the Committee</b>		(CRO-1720)		\$	
<b>25) Administrative Support</b>		(CRO-1440)		\$	
<b>26) Forgiven Loans</b>		(CRO-1440)		\$	
<b>27) 48-Hour Notice Reports Sum</b>		(CRO-2200)		\$	
<b>28) Contributions to be Refunded</b>		(CRO-1215)		\$	

## Optional form used to report NC Contributions From Individuals of \$50 or less

1 of 1

☐ Yes ☒ No[illegible]

April 2007

# Contributions from Individuals

Pg 1 of 2 Amendment ☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Mike Woodard					20-2892994	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, &amp; zip)</small> Michael W. Shiflett 1308 Broad Street Durham, NC 27705			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			President			
			<b>c. Employer's Name/Specific Field</b>			
			American Labor		<b>e. Election Sum to Date</b>	
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		10/14/09	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, &amp; zip)</small> Lewis A. Cheek 5500 Old Brandt Trace Greensboro, NC 27455			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			Attorney			
			<b>c. Employer's Name/Specific Field</b>			
			K&L Gates		<b>e. Election Sum to Date</b>	
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		10/21/09	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> <small>(include city, state, &amp; zip)</small> Jason C. Watson 2404 Edgemont Road Wendell, NC 27591			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			Small Business Owner			
			<b>c. Employer's Name/Specific Field</b>			
			Self-Employed		<b>e. Election Sum to Date</b>	
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Check		10/26/09	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 300.00	
5. Total of ALL CRO-1210 Pages						
<small>(This line must be on last 6 of Detailed Summary Page CRO-1100)</small>						

# Contributions from Individuals

Pg 2 of 2 Amendment ☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Mike Woodard					20-2892994	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
William J. and Leigh Brian 239 Country Club Drive Durham, NC 27712			Attorney			
			Research Analyst			
			<b>c. Employer's Name/Specific Field</b>			
			K&L Gates		<b>e. Election Sum to Date</b>	
			Duke Medical Center		\$ 100.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>		Check		10/27/09	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
John L. Atkins III PO Box 12037 Research Triangle Park, NC 27709			President			
			Architect			
			<b>c. Employer's Name/Specific Field</b>			
			O'Brien Atkins		<b>e. Election Sum to Date</b>	
					\$ 250.00	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>		Check		10/30/09	\$ 250.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
			<b>c. Employer's Name/Specific Field</b>			
					<b>e. Election Sum to Date</b>	
					\$	
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>	<b>k. Amount</b>	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<b>4. Total only this Page</b>					\$ 350.00	
<b>5. Total of ALL CRO-1210 Pages</b>					\$ 650.00	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

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JAN 12 2010

IN PERSON

# Disbursements

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>
Committee to Elect Mike Woodard						20-2892994
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>			
			<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality			
						<b>e. Election Sum to Date</b>
						\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
		O		\$		
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>			
			<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality			
						<b>e. Election Sum to Date</b>
						\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
				\$		
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>b. Coordinated Committee Name</b>		<b>d. Comments</b>	
			<b>c. Level Registered (Specify)</b>			
			<input type="checkbox"/> Federal <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Municipality			
						<b>e. Election Sum to Date</b>
						\$
<b>f. Account Code</b>	<b>g. Form of Payment</b>	<b>h. Purpose Code</b>	<b>i. Date (mm/dd/yyyy)</b>	<b>j. Amount</b>	<b>k. Required Remarks</b>	
				\$		
				\$		
<b>5. Total only this Page</b>						\$ 0.00
<b>6. Total of ALL CRO-1310 Pages</b>						\$ 0.00
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
<b>7. Purpose Codes</b> <i>(List detailed expenditure code in (f.) above)</i>						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		O* - Other
* Codes require detailed explanation in required remarks field (k)						

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